

SERFF Tracking Number: AMCM-126388273 State: Arkansas
Filing Company: American Community Mutual Insurance Company State Tracking Number: 44120
Company Tracking Number: AR-ACCBEN (11/09)
TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)
Product Name: Accident Benefit Rider
Project Name/Number: /

Filing at a Glance

Company: American Community Mutual Insurance Company

Product Name: Accident Benefit Rider

SERFF Tr Num: AMCM-126388273 State: Arkansas

TOI: H16I Individual Health - Major Medical

SERFF Status: Closed-Approved-Closed
State Tr Num: 44120

Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)

Co Tr Num: AR-ACCBEN (11/09) State Status: Approved-Closed

Filing Type: Form

Author: Michele Dickelman

Reviewer(s): Rosalind Minor

Date Submitted: 11/18/2009

Disposition Date: 11/19/2009

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: Exempt from filing in Michigan.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 11/19/2009

Explanation for Other Group Market Type:

State Status Changed: 11/19/2009

Deemer Date:

Created By: Michele Dickelman

Submitted By: Michele Dickelman

Corresponding Filing Tracking Number:

Filing Description:

Form AR-ACCBEN (11/09) is a Rider that will be issued with Policy Form IND09 approved for use on October 9, 2008. It is a new form and does not replace any forms currently in use.

Any bracketed material represents variable information. No such items will be contradictory to any applicable state or federal law.

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Company
Company Tracking Number: AR-ACCBEN (11/09)
TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005A Individual - Preferred Provider
(PPO)
Product Name: Accident Benefit Rider
Project Name/Number: /

Company and Contact

Filing Contact Information

Michele Dickelman, Sr. Compliance Specialist mdickelman@american-community.com
39201 Seven Mile Road 800-991-2642 [Phone] 4687 [Ext]
Livonia, MI 48152 734-591-4628 [FAX]

Filing Company Information

American Community Mutual Insurance CoCode: 60305 State of Domicile: Michigan
Company
39201 Seven Mile Road Group Code:
Livonia, MI 48152 Group Name: Company Type:
(800) 991-2642 ext. [Phone] FEIN Number: 38-1290976
State ID Number:

Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No
Fee Explanation: \$20 per form x 1 form = \$20
ACMIC USE ONLY acct # 6200030
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Community Mutual Insurance Company	\$20.00	11/18/2009	32130792

SERFF Tracking Number:	AMCM-126388273	State:	Arkansas
Filing Company:	American Community Mutual Insurance Company	State Tracking Number:	44120
Company Tracking Number:	AR-ACCBEN (11/09)		
TOI:	H16I Individual Health - Major Medical	Sub-TOI:	H16I.005A Individual - Preferred Provider (PPO)
Product Name:	Accident Benefit Rider		
Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	11/19/2009	11/19/2009

<i>SERFF Tracking Number:</i>	<i>AMCM-126388273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Community Mutual Insurance</i>	<i>State Tracking Number:</i>	<i>44120</i>
	<i>Company</i>		
<i>Company Tracking Number:</i>	<i>AR-ACCBEN (11/09)</i>		
<i>TOI:</i>	<i>H16I Individual Health - Major Medical</i>	<i>Sub-TOI:</i>	<i>H16I.005A Individual - Preferred Provider</i>
			<i>(PPO)</i>
<i>Product Name:</i>	<i>Accident Benefit Rider</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Disposition

Disposition Date: 11/19/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: AMCM-126388273 State: Arkansas

Filing Company: American Community Mutual Insurance Company State Tracking Number: 44120

Company Tracking Number: AR-ACCBEN (11/09)

TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005A Individual - Preferred Provider (PPO)

Product Name: Accident Benefit Rider

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	Yes
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Form	Accident Benefit Amendment Rider	Approved-Closed	Yes

SERFF Tracking Number: AMCM-126388273 State: Arkansas

Filing Company: American Community Mutual Insurance Company State Tracking Number: 44120

Company Tracking Number: AR-ACCBEN (11/09)

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005A Individual - Preferred Provider (PPO)

Product Name: Accident Benefit Rider

Project Name/Number: /

Form Schedule

Lead Form Number:

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 11/19/2009	AR-ACCBEN (11/09)	Policy/Cont ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Accident Benefit Amendment Rider	Initial		40.000	AR-ACCBEN (11-09).pdf

AMERICAN COMMUNITY MUTUAL INSURANCE COMPANY
(Herein referred to as "We, Us, Our")
[39201 West Seven Mile Road, Livonia, Michigan 48152]

ACCIDENT BENEFIT AMENDMENT RIDER

This amendment rider is a part of the policy to which it is attached. It is subject to all the terms and conditions of the policy not inconsistent with it.

[This amendment rider is effective on the later of the Effective Date of the policy to which it is attached or January 1, 2010.]

The following Accident Benefit provision has been DELETED from the policy:

Accident Benefit. If a Family Member sustains an Injury, We will waive the Deductible and pay the Covered Charges related to the Injury at the Benefit Percentage shown on the Schedule for services incurred within 30 days of the Injury subject to the maximum shown on the Schedule. The Deductible will be applied to any Covered Charges incurred after the 30 day limit has been met or the maximum reached, whichever occurs first.

The Common Accident Benefit provision has been REPLACED with the following:

Common Accident Benefit: If a single accident causes Injury to more than one Family Member, only one Deductible will be applied to any Covered Charges associated with the common accident.

Signed for American Community Mutual Insurance Company at Livonia, Michigan


[
President & CEO]

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TOI:	H161 Individual Health - Major Medical	Sub-TOI:	H161.005A Individual - Preferred Provider (PPO)
Product Name:	Accident Benefit Rider		
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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification	Approved-Closed	11/19/2009
Comments:			
Attachment:			
AR-ACCBEN 11-09 (Readability).pdf			
		Item Status:	Status Date:
Bypassed - Item:	Application	Approved-Closed	11/19/2009
Bypass Reason:	n/a		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification	Approved-Closed	11/19/2009
Bypass Reason:	n/a		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage	Approved-Closed	11/19/2009
Bypass Reason:	n/a		
Comments:			

AMERICAN COMMUNITY MUTUAL INSURANCE COMPANY
39201 Seven Mile Road, Livonia, Michigan 48152
734-591-9000 • FAX 734-591-4628
NAIC Company #60305 • NAIC Group #166

READABILITY CERTIFICATION

TO: THE ARKANSAS DEPARTMENT OF INSURANCE

DATE: November 18, 2009

Form Number

Description

AR-ACCBEN (11/09)

Accident Benefit Amendment Rider

I certify that the above form meets or exceeds a score of forty (40) on the Flesch Readability Test.

Francis P. Dempsey, Senior Vice President
General Counsel & Corporate Secretary

November 18, 2009

DATE